

FILE NOW: FILING FEE IS \$61.25

**FILED**  
**May 10, 1999 8:00 am**  
**Secretary of State**

05-10-1999 90293 011 \*\*\*\*61.25

**NONPROFIT CORPORATION ANNUAL REPORT 1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT #**

#756018

1. Corporation Name

AZALEA WOODS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

3438 East Lake Rd., #22  
 Palm Harbor, FL 34685

3438 East Lake Rd., #22  
 Palm Harbor, FL 34685

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

1/22/81

22 City & State

27 City & State

4. FEI Number

59-2169265

Applied For

Not Applicable

23 Zip

Country

28 Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

24

25

29

30

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

William J. Nasser  
 2697-B Sunset Point Rd.  
 Clearwater, FL 33759

81 Name

James M. Nolan

82 Street Address (P.O. Box Number is Not Acceptable)

3438 East Lake Rd., #22

83

84 City

Palm Harbor

FL

85 Zip Code

34685

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE *James M. Nolan*

4/28/99

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	Paul M. DeMeo	
STREET ADDRESS	2460 Northside Dr. #603	
CITY-ST-ZIP	Clearwater, FL 33761	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	Joseph DeMeis	
STREET ADDRESS	2460 Northside Dr., 1501	
CITY-ST-ZIP	Clearwater, FL 33761	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	Judy A. McOwen	
STREET ADDRESS	2460 Northside Dr.	
CITY-ST-ZIP	Clearwater, FL 33761	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	Colleen Linning	
STREET ADDRESS	2460 Northside Dr. #903	
CITY-ST-ZIP	Clearwater, FL 33761	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Geraldine White	
STREET ADDRESS	2460 Northside Dr.	
CITY-ST-ZIP	Clearwater, FL 33761	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Judy A. McOwen*

Judy A. McOwen Secy.

4/29/99

727 785 8887